

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO.       | DATE            |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION         |           |              |                 |
| O.I.P.E. CLASSIFIER       |           |              |                 |
| FORMALITY REVIEW          | <i>HC</i> | <i>52-96</i> | <i>08-23-01</i> |
| RESPONSE FORMALITY REVIEW | <i>LC</i> | <i>1024</i>  | <i>4-1-02</i>   |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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 5-24-02